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| St. Anthony Regional Hospital  POLICY/PROCEDURE | Effective Date: | Latest Revised Date:  Reviewed Date: |
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| Title: SURVEILLANCE OF TEST RESULTS | | Department: Laboratory |

**Policy:** The Pathologist and Laboratory Manager will delegate the daily surveillance of results of tests ordered and reported by St.Anthony Regional Hospital Laboratory to the department technologist performing the test. All reports are verified in the computer by the laboratory tech after reviewing the results. The laboratory manager and Pathologist are available for any problems.

The “Specimen Tracking Screen” will be checked throughout the day and at the end of each shift. If there are tests in the outstanding at the end of the shift – that information will be communicated to the staff taking over the next shift.

The Exception Report of critical values is reviewed daily by the Laboratory Manager, Pathologist and/or the Technical Supervisor.

1. **Test that appear inconsistent with relevant criteria:**
2. If the test results appear inconsistent with the patient status or other laboratory tests, investigate the test for the sources of error.
3. Rerun the test. If still inconsistent, inquire further.
4. Rerun the test with Quality Control.
5. Inquire into the identification and collection of the sample.
6. Recollect and reanalyze the sample.
7. If it is still inconsistent, contact the patient’s physician or RN.
8. Contact or pass the information on to the Pathologist or Laboratory Manager.
9. **Abnormal Results**
10. If abnormal results are found, review the patients other laboratory results.
11. If the patient has had a current previous abnormal result, the results may be verified with /R and the comment “Previous abnormal result”.
12. If there is not a previous abnormal result, then rerun the specimen. If the results match, then verify the results with /R and comment “Results Repeated”. If the results do not match, then investigate the test for sources of error.
13. **Critical Results**
14. If the results are in the critical abnormal range, then rerun the test.
15. If the results match, then call the results according to the Critical Value Policy. If the results do not match, investigate the test for sources of error.
16. **Corrected Report**
17. If an error is detected for a laboratory test that has been verified and reported, it must

be corrected in the LIS as soon as possible with the comment “Corrected Report”.

1. Correct the laboratory results and notify the physician or RN as soon as possible.
2. Complete a “Corrected Results” form and file in the Corrected Results binder. If critical results are included in the corrected results, place it on the Managers desk for review.
3. If further follow-up with the physician is needed, notify the Laboratory Manager or Pathologist.